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APPLICANTS

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** CONTINUING DATA *****

None

** FOREIGN APPLICATIONS *****

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IF REQUIRED, FOREIGN FILING LICENSE GRANTED

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| Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no | STATE OR COUNTRY GERMANY | SHEETS DRAWING 1 | TOTAL CLAIMS 5 | INDEPENDENT CLAIMS 2 |
| 35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance | | | | |
| Verified and Acknowledged | Examiner's Signature | Initials | | |

ADDRESS

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10017-5621

TITLE

Rotating electric hand tool implement with safety routine

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|----------------------------|---|---|
| FILING FEE RECEIVED | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | <input type="checkbox"/> All Fees |
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